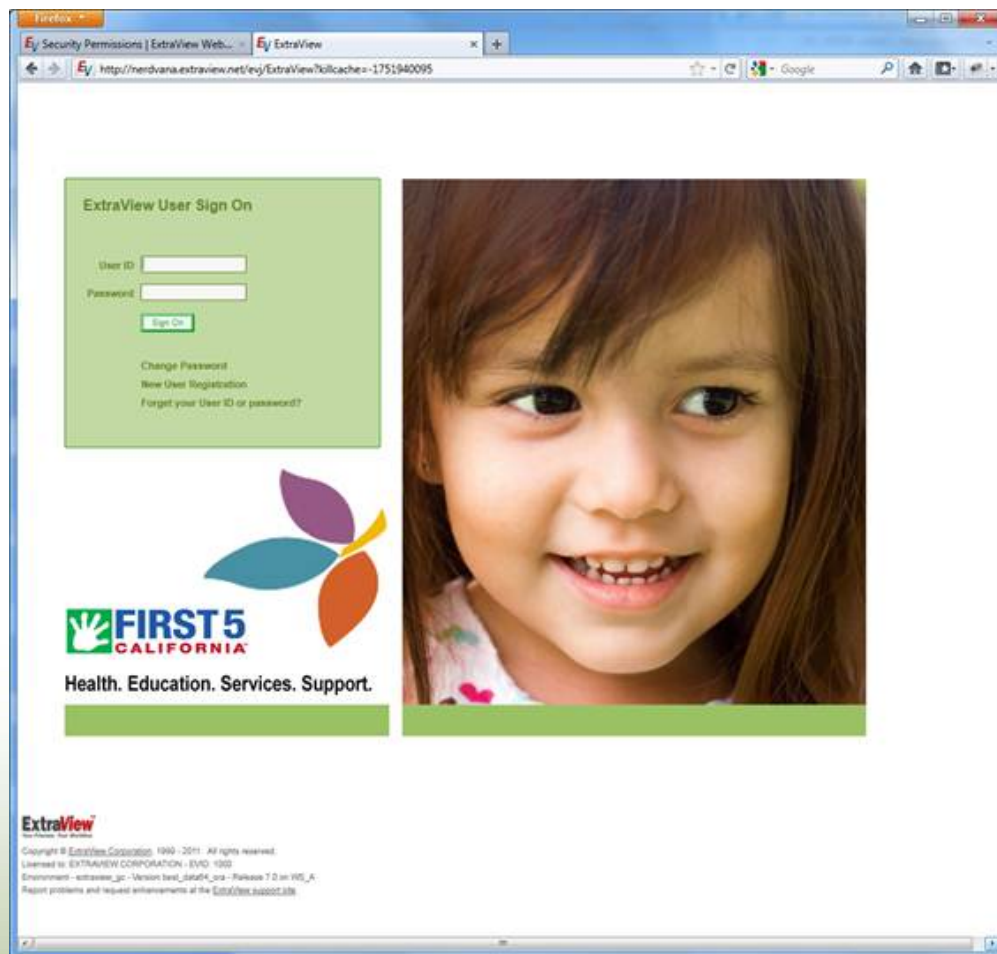


Teacher Signature Program Data Collection System



Preview of PROOF Screens



☐ Program Setup

- View information about the State Signature Program
- Understand the reporting requirements of the State
- Define data elements specific to County needs

☐ List Administration

- Designate contacts within the County

☐ Program Operations

- Submit required reports to the State
- List participants within a program

☐ Participants

- Setup a participant
- Manage a participant within each Program

PROOF Screens – Program Setup



☐ Program Profile

- State Signature Program Start and End Dates
- Program Focus

☐ Program Requirements

- Required Report Submissions

☐ County Setup

- Fiscal Year Allocations and Budgets
- Lead Agency and Designation of Components
- Local Area Agreements
- Partners and Contacts
- County Specific Fields

Program Setup



Profile Detail	Program Requirements	County Setup
----------------	----------------------	--------------

Program Profile

- * Program Name State Signature Program II
- * Program Description State Signature Program
- * Program Type State Signature Program
- * Program Status Active
- * Program includes Phase Yes
I (planning and development)
 - * Phase I Start Jul 1, 2011
 - * Phase II Start Aug 1, 2011
 - Program Start Jul 1, 2011
- * Phase I End Jul 31, 2011
- * Phase II End Jul 31, 2013
- Program End Jul 31, 2013

Commission Approval

- * Total Authority 35,000,000
- Agenda Item Number 100
- Commission Approval Date Jun 1, 2011

Program Focus

Strategic Goal 1 Focus on Policy Development: Implement a comprehensive policy agenda that elevates...

Strategies 1.1 Affiliations - Increase the number and depth of state and national partnerships and...

- * Service / Result Area Child Development Early Education Program

Solicitation

Solicitation Type Request for Funding

- * Release Date Apr 1, 2011
- * Award Date May 1, 2011

First 5 California Program Owners

There are no related items

Program Documents

Attach (Click button to add.)	Document Name	Version	Date
Add another row			

Program Setup – Reporting Requirements



Program Name State Signature Program II

ID # 10158

Profile Detail

Program Requirements

County Setup

Program Requirements

Refresh

	Program Requirement Name ▾	Program Requirement Description ▾	First Submission Period Start ▾	First Submission Period End ▾	Due Date ▾	Reporting Cycle ▾	Attachment Required ▾	Workflow Type ▾	Identify Section Changes Required ▾
Edit	E&A Plan	E&A Plan for State Signature Program II	Aug 1, 2011	Sep 30, 2011	Oct 31, 2011	One Time	Yes	Program	Yes
Edit	QPR	QPR for State Signature Program II	Oct 1, 2011	Dec 31, 2011	Jan 31, 2012	Semi-Annual	Yes	Program	Yes

Update

Update & Continue

History

Close

Print Page

Program Setup – County Program Details



[Update](#) [Update & Continue](#) [History](#) [Close](#) [Print Page](#)

County Program Requirements

Added

Fiscal Year Allocations and Budgets

	Phase	Fiscal Year	Fiscal Year Status	Allocation	Approved Reimbursable Budget	Match Ratio	Local Match Budgeted
Edit	Phase I	2012/2013	Active	1,000,000	1,000,000	1:2	2,000,000

[County Program Details](#) [Local Area Agreements](#) [Partners and Contacts](#) [County Specific Fields](#)

Lead Agency

* Is the County Lead Agency Yes

Local Public Entity

* County Represented by No
Local Public Entity?

Component Setup

All Counties Participate in Core

* Component Selection

- CORE
- Component A
- Component B
- Component C

Notes

Program Setup – Partners & Contacts



Update

Update & Continue

History

Close

Print Page

County Representative Contacts

Add another row

	Organization ▾	Contact Name ▾	Title ▾	Fiscal ▾	Program ▾	Evaluation ▾	Executive Director ▾	Receive Reminders? ▾	Address ▾	Contact Primary Phone ▾	Primary Email Address ▾
Edit	Alameda County Commission	Josh Letterman	Manager of Programs	Y	N	Y	N	N		(946) 551-1255	JLetterman@alameda.org

Funding Partners

Add another row

	Organization ▾	Contact Name ▾	Title ▾	Address ▾	Contact Primary Phone ▾	Primary Email Address ▾	Account Code ▾	Funding Type ▾
Edit	Alameda Preschool Funding	Jesse Smith	CPA		(213) 423-5452	Accounting@accoutning.com	124587	Proposition 10 county tax revenue

Consortium Partners (Non-Funding Partners)

Add another row

	Organization ▾	Contact Name ▾	Title ▾	Address ▾	Contact Primary Phone ▾	Primary Email Address ▾
Edit	First 5 Alameda	Eve Gardner	Director		(869) 608-6087	Eve@department.com

Program Setup – County Specific Fields



Update

Update & Continue

History

Close

Print Page

County Specific Field Labels

Date Field Labels

User Defined Alameda Date 1

Date Field 1

User Defined Alameda Date 2

Date Field 2

User Defined

Date Field 3

User Defined

Date Field 4

User Defined

Date Field 5

User Defined

Date Field 6

User Defined

Date Field 7

User Defined

Date Field 8

User Defined

Date Field 9

User Defined

Date Field 10

Text Field Labels

User Defined Alameda Text 1

Text Field 1

User Defined Alameda Text 2

Number Field Labels

User Defined Alameda No. 1

Number Field 1

User Defined

Number Field 2

User Defined

Number Field 3

User Defined

Number Field 4

User Defined

Number Field 5

User Defined

Number Field 6

User Defined

Number Field 7

User Defined

Number Field 8

User Defined

Number Field 9

User Defined

Number Field 10

☐ Organization

- Organization Type and Profile
- Location (s)
- Contact(s)
- Notes

List Administration

Organization

Organization

[Return to Find an Organization](#)

Organization Profile

* Organization Category

* Organization Name

* Organization Status

Public Web Site

Select County

Notes

Organization Notes



List Administration

Organization Address

Add another row								
	Location Name ▾	Mailing Address ▾	Street 1 ▾	Street 2 ▾	City ▾	State ▾	Zip ▾	County ▾
Edit	Location - West Side	Y	123 Main Street		Oakland	CA	95888	Alameda

Organization Contacts

Add another row							
	First Name ▾	Last Name ▾	Title ▾	Executive Director ▾	Department ▾	Contact Primary Phone ▾	Primary Email Address ▾
Edit	Joanna	Smith		Y		(508) 699-2457	jsmith@myalameda.org

Notes

Organization Notes



Edit Jul 20, 2011 TESTALAMEDA

notes on my county commission

☐ Participant Profile

- Demographics

☐ Program Participation

- Participation Status
- Components Applied For and Approved For
- Work History
- Education
- Notes
- County Specific Fields

Participant Information



Update	Update & Continue	History	Close	Print Page
--------	-------------------	---------	-------	------------

Participant Information

ID # 10062

First Name	<input type="text" value="Jessie"/>	Middle Initial	<input type="text" value="L"/>
* Last Name	<input type="text" value="Jenkins"/>	Previous Last Name	<input type="text"/>
* Date of Birth	<input type="text" value="Jul 13, 1980"/>	City of Birth	<input type="text" value="Chicago"/>
Advisor	<input type="text" value="Adam Watts"/>		

Profile	Program
---------	---------

Status

Participant Status	<input type="text" value="Active"/>
County of Participation	<input type="text" value="Alameda"/>

Identifiers

Last 5 digits of SSN	<input type="text" value="76987"/>	Other Unique Identifier	<input type="text"/>
----------------------	------------------------------------	-------------------------	----------------------

Demographics

Gender	<input type="text" value="Female"/>	Race/Ethnicity	<input type="text" value="Asian"/>
Primary Language	<input type="text" value="English"/>	Secondary Language	<input type="text" value="Japanese"/>

Program Participation



Participation Activities CLASS Assessment

Period of Participation 2011/2012 ▼

* Program Participation Status Save ▼

Application Date Jul 28, 2011

Consent ☐ * None * ☒ Yes ☐ No

Consent Date Jul 28, 2011

Consent Expiration Jul 27, 2021

* County Alameda ▼

First Year of Participation? ☒ No ☐ Yes

Program Components Applied For
* None *
> CORE
> Component A
Component B ▼

Program Components Approved For
* None *
> CORE
> Component A
Component B ▼

Work History Education Notes County Specific Data

Program Participation – Work History



Work Facility

Facility Description

Work Facility Name

Director / Operator Last Name

Director / Operator First Name

Setting Type

Center Type

Accreditation Type

Licensing Status

Program Number (license)

License Program Type

Priority Zone Status

Typical Hours of Operation
> M-F between 7 AM and 6 PM
M-F between Midnight and 5 AM
M-F between 5 AM and 6 PM

Months of Operation per Year

Ages Served at Facility
2 Years to 2 Years 11 Months
2 Years 12 Months to 5 Years

Program Participation - Education



Highest Level of Education	<input type="text" value="* None *"/>
Field of Bachelor's Degree	<input type="text" value="* None *"/>
Degree from Foreign Education	<input type="radio"/> Yes <input type="radio"/> No

Teaching Credential	<input type="text" value="* None *"/>
---------------------	---------------------------------------

ECE/CD Units Prior to Entry	<input type="text"/>
Professional Growth Hours in last 5 years	<input type="text"/>

Permit Most Recently Acquired	<input type="text" value="* None *"/>
Permits Applied for but not yet Received	<input type="text" value="* None *"/>

First Aid Training	<input type="radio"/> Yes <input type="radio"/> No
CPR Certification	<input type="radio"/> Yes <input type="radio"/> No

Program Participation – County Fields



Work History	Education	Notes	County Specific Data
County-Defined Date Fields			
Alameda Date 1		Date Label 1	<input type="text"/>
Alameda Date 2		Date Label 2	<input type="text"/>
		Date Label 3	<input type="text"/>
		Date Label 4	<input type="text"/>
		Date Label 5	<input type="text"/>
County-Defined Number Fields			
Alameda No. 1		Number Label 1	<input type="text"/>
		Number Label 2	<input type="text"/>
		Number Label 3	<input type="text"/>
		Number Label 4	<input type="text"/>
		Number Label 5	<input type="text"/>
		Number Label 6	<input type="text"/>
		Number Label 7	<input type="text"/>
		Number Label 8	<input type="text"/>
		Number Label 9	<input type="text"/>
		Number Label 10	<input type="text"/>
County-Defined Text Fields			
Alameda Text 1		Text Label 1	<input type="text"/>
Alameda Text 2		Text Label 2	<input type="text"/>
		Text Label 3	<input type="text"/>
		Text Label 4	<input type="text"/>

☐ Program Activities

- CORE
- Component A
- Component B
- Component C
- Component D

☐ CLASS Assessment

Program Activities



Participation

Activities

CLASS Assessment

Potential Stipend

12

Stipend Received

12

Stipend Source

Cares Plus

Incentive Estimated Value

12

Incentive Type

21

Dimensions Selected for Improvement

* None *

Positive Climate

> Negative Climate

> Teacher Sensitivity

Certify

☒

I certify the Participant has met the State's requirements and the documentation is stored.

TESTALAMEDA

Core

Component A

Component B

Component C

Component D

Program Activities - CORE



Core

Component A

Component B

Component C

Component D

Core

Professional Development Plan ☒ Yes ☐ No

Date of Intro to CLASS Completion

Jul 19, 2011

Not Required for 2nd Year Preschool Teachers

Date of LAC Completion

Jul 26, 2011

Not Required for 2nd Year Preschool Teachers

Date of Second Hand Smoke Course Completion

Jul 26, 2011

Not Required for 2nd Year Teachers of all types

Attended 2 Meetings with Advisor? ☒ No ☐ Yes

Core Status

Complete

Meeting with Advisor

Delete

Date of Meeting with Advisor

☐

Program Activities – Component A



Core

Component A

Component B

Component C

Component D

Component A

Total Hours Required to Complete A = 21 hours/year

Sum of Hours Completed 21

Component A Status Complete

Calculate Total Hours

Training

Delete	* Course Title	* Course Provider	* Completion Date	* Credit Hours	* Area
<input type="checkbox"/>	My Course	US Berkeley	Jul 18, 2011	21	Preschool English Learner Guide (PEL)

Add another row

Notes

Component A Notes

Update

Update & Continue

History

Close

Print Page

Program Activities – Component B



Component B

Total Units Required to Complete Component B = 6 units/year

Did the advisor verify that courses ☒ Yes ☐ No
were considered in the following
priority order, as stated in the RFA?

Sum of Units Completed

Component B Status

[Calculate Total Units](#)

Course(s)

[Add another row](#)

	Course Title ▾	Course Provider ▾	Coursework Type ▾
Edit	My Course	My Provider	Core 8

Notes

Component B Notes



Program Activities – Component C



Core

Component A

Component B

Component C

Component D

Component C

Completion date of intro
to CLASS - special Advisor's
selection (six hours)

Jul 27, 2011



Local CARES Plus program
training - course title

My Program title

Local CARES Plus program
training - provider

Provider

Local CARES Plus program
training - completion
date

Jul 26, 2011



Component C Status

* None *



Advisee(s)

Delete	Participant ID	* Participant Last Name	* Participant First Name	Participant Date of Birth
<input type="checkbox"/>	1344	Hones	Jason	

Add another row

Notes

Component C Notes

Program Activities – Component D




Core Component A Component B Component C **Component D**



Component D





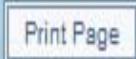
Status

Complete ☒

Date of Completion Jul 26, 2011 

Notes

Component D Notes  

Program Activities – CLASS Assessment



Selected for CLASS Assessment ☒ Yes ☐ No

Assessment Identifier

CLASS Assessment Date

CLASS Assessment Type

CLASS Assessor

Start Time

End Time

NoC1	<input type="text" value="1"/>	NoC2	<input type="text" value="1"/>	NoC3	<input type="text" value="1"/>	NoC4	<input type="text" value="1"/>	NoC5	<input type="text" value="1"/>	NoC6	<input type="text" value="1"/>	NoC avg	<input type="text" value="1"/>
PC1	<input type="text" value="1"/>	PC2	<input type="text" value="2"/>	PC3	<input type="text" value="3"/>	PC4	<input type="text" value="4"/>	PC5	<input type="text" value="5"/>	PC6	<input type="text" value="6"/>	PC avg	<input type="text" value="3.5"/>
NC1	<input type="text" value="1"/>	NC2	<input type="text" value="2"/>	NC3	<input type="text" value="3"/>	NC4	<input type="text" value="4"/>	NC5	<input type="text" value="5"/>	NC6	<input type="text" value="6"/>	NC avg	<input type="text" value="3.5"/>
TS1	<input type="text" value="1"/>	TS2	<input type="text" value="1"/>	TS3	<input type="text" value="1"/>	TS4	<input type="text" value="1"/>	TS5	<input type="text" value="1"/>	TS6	<input type="text" value="1"/>	TS avg	<input type="text" value="1"/>
RSP1	<input type="text" value="1"/>	RSP2	<input type="text" value="1"/>	RSP3	<input type="text" value="1"/>	RSP4	<input type="text" value="1"/>	RSP5	<input type="text" value="1"/>	RSP6	<input type="text" value="1"/>	RSP avg	<input type="text" value="1"/>
BM1	<input type="text" value="1"/>	BM2	<input type="text" value="1"/>	BM3	<input type="text" value="1"/>	BM4	<input type="text" value="1"/>	BM5	<input type="text" value="1"/>	BM6	<input type="text" value="1"/>	BM avg	<input type="text" value="1"/>
PD1	<input type="text" value="1"/>	PD2	<input type="text" value="1"/>	PD3	<input type="text" value="1"/>	PD4	<input type="text" value="1"/>	PD5	<input type="text" value="1"/>	PD6	<input type="text" value="1"/>	PD avg	<input type="text" value="1"/>
ILF1	<input type="text" value="1"/>	ILF2	<input type="text" value="1"/>	ILF3	<input type="text"/>	ILF4	<input type="text"/>	ILF5	<input type="text"/>	ILF6	<input type="text"/>	ILF avg	<input type="text" value="1"/>
CD1	<input type="text" value="1"/>	CD2	<input type="text" value="1"/>	CD3	<input type="text"/>	CD4	<input type="text"/>	CD5	<input type="text"/>	CD6	<input type="text"/>	CD avg	<input type="text" value="1"/>
QF1	<input type="text"/>	QF2	<input type="text"/>	QF3	<input type="text"/>	QF4	<input type="text"/>	QF5	<input type="text"/>	QF6	<input type="text"/>	QF avg	<input type="text"/>
LM1	<input type="text"/>	LM2	<input type="text"/>	LM3	<input type="text"/>	LM4	<input type="text"/>	LM5	<input type="text"/>	LM6	<input type="text"/>	LM avg	<input type="text"/>

Emotional Support Classroom Organization Instructional Support

- ☐ **Participant Checklist**
- ☐ **CLASS Scores Assessment**
- ☐ **Stipends by Component**
- ☐ **Participant Demographic Counts by Program**
- ☐ **Number of Participants in Component B by Core 8 Category**
- ☐ **Participant Export Report**

Additional information on each report can be found on the PROOF Project website:

http://www.ccfc.ca.gov/evaluation/PDF/pro0f/PRO0F_Standard_Reports.pdf

☐ **Comprehensive Online Help**

- Hover Help
- Field Level
- Context Sensitive
- User Guide
- Quick Reference Guides
- Online Videos

☐ **Help Desk Support**

Online Help – Hover Help

Participation

Activities

CLASS Assessment

Period of Participation

* Program Participation

Status

Application

This is the status of the participant's program record. Click the link for more field definitions.

Consent ☐ None ☐ Yes ☐ No

Consent Date 

Consent Expiration

* County

First Year of Participation? ☐ No ☐ Yes

Online Help – Field Level Help



File Edit View Favorites Tools Help

x Google Search More >> Sign In

★ Favorites Web Slice Gallery

Field Definitions#PROGRAM_PARTICL...

Home RSS Page Safety Tools ?

Participation Status

Participation Status is set in the participant's intake record and indicates the stage of the participant in relation to their participation in a program.

[Back to Top](#)

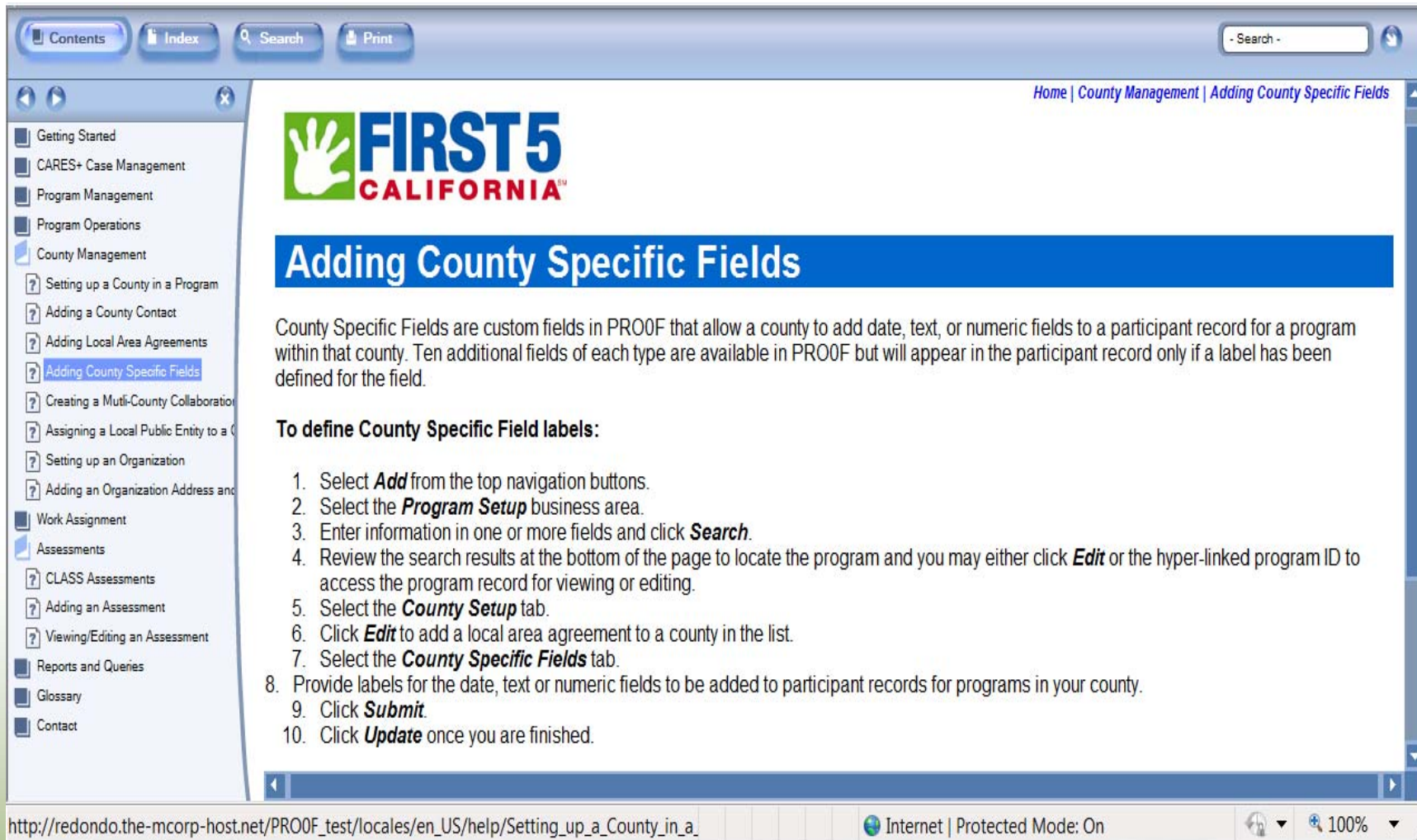
PC Average

This is the average of all PC (Positive Climate) scores received by the participant during a specific assessment.

[Back to Top](#)

PC1 - PC6


Specific assessments are broken into cycles of up to six evaluations throughout the day for the assessment. These are numbered 1 through 6. PC1-PC6 are the scores received by the participant for PC (Positive Climate) during the assessment.



The screenshot shows a web browser window displaying the FIRST5 CALIFORNIA online help page. The page has a blue header with navigation buttons: 'Contents', 'Index', 'Search', and 'Print'. A search bar is located in the top right corner. The left sidebar contains a tree view of the help topics, with 'County Management' expanded and 'Adding County Specific Fields' selected. The main content area features the FIRST5 CALIFORNIA logo and a blue banner with the title 'Adding County Specific Fields'. Below the banner, a paragraph explains that County Specific Fields are custom fields in PROOF that allow a county to add date, text, or numeric fields to a participant record for a program within that county. Ten additional fields of each type are available in PROOF but will appear in the participant record only if a label has been defined for the field. A section titled 'To define County Specific Field labels:' lists ten steps: 1. Select **Add** from the top navigation buttons. 2. Select the **Program Setup** business area. 3. Enter information in one or more fields and click **Search**. 4. Review the search results at the bottom of the page to locate the program and you may either click **Edit** or the hyper-linked program ID to access the program record for viewing or editing. 5. Select the **County Setup** tab. 6. Click **Edit** to add a local area agreement to a county in the list. 7. Select the **County Specific Fields** tab. 8. Provide labels for the date, text or numeric fields to be added to participant records for programs in your county. 9. Click **Submit**. 10. Click **Update** once you are finished. The browser's address bar shows the URL: http://redondo.the-mcorp-host.net/PROOF_test/locales/en_US/help/Setting_up_a_County_in_a. The status bar at the bottom indicates 'Internet | Protected Mode: On' and a zoom level of 100%.

Contents Index Search Print

Home | County Management | Adding County Specific Fields



Adding County Specific Fields

County Specific Fields are custom fields in PROOF that allow a county to add date, text, or numeric fields to a participant record for a program within that county. Ten additional fields of each type are available in PROOF but will appear in the participant record only if a label has been defined for the field.

To define County Specific Field labels:

1. Select **Add** from the top navigation buttons.
2. Select the **Program Setup** business area.
3. Enter information in one or more fields and click **Search**.
4. Review the search results at the bottom of the page to locate the program and you may either click **Edit** or the hyper-linked program ID to access the program record for viewing or editing.
5. Select the **County Setup** tab.
6. Click **Edit** to add a local area agreement to a county in the list.
7. Select the **County Specific Fields** tab.
8. Provide labels for the date, text or numeric fields to be added to participant records for programs in your county.
9. Click **Submit**.
10. Click **Update** once you are finished.

http://redondo.the-mcorp-host.net/PROOF_test/locales/en_US/help/Setting_up_a_County_in_a Internet | Protected Mode: On 100%

☐ User Roles

- County Super User
- County Program Manager
- Participant Data Entry
- Advisor
- Assessor (Locally or State Funded)

Security – User Roles



Role	Description
County Super User	<ul style="list-style-type: none">• Allows the county user to access all county functions with the PROOF system.• Allows the user to manage their county's<ul style="list-style-type: none">○ Program○ Participants○ Required report submissions.
County Program Manager	<ul style="list-style-type: none">• Supports the county user who is only responsible for county program management.• Allows the user to manage information on their county(s) program data and required report submissions.• Allows the user to view participant data.
Participant Data Entry	<ul style="list-style-type: none">• Supports the county user or designee who is only responsible for participant management.• Allows the user to manage their county(s) participant data.• Restricts the user from program management and operations.

Security – User Roles (continued)



Role	Description
Advisor	<ul style="list-style-type: none">• Allows the county to limit access within the PROOF system to specific participant records.• Restricts the Advisor to his/her assigned participant records only.
Assessor (Locally or State Funded)	<ul style="list-style-type: none">• Allows the Assessor to report participant CLASS evaluation scores.• Allows the Assessor to manage participant CLASS assessments across the county while restricting his/her access to participant data.

PROOF System – In Progress



- ☐ **User Acceptance Testing**
- ☐ **User ID Requests**
- ☐ **Training**